

CHECK DATE	CHECK NUMBER	PAGE
04/21/2017	128581	1 OF 2

VENDOR (100913) FIRST CITIZENS BANK

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
4472565264423206	04/03/17		358-000-5400	EMA	30.76
			100-355-5207	EMA	62.12
			358-000-5400	EMA	13.29
			358-000-5400	EMA	19.24
			360-017-5400	EMA	3.24
			360-017-5400	EMA	21.37
			360-017-5400	EMA	13.16
			358-000-5400	EMA	21.60
			358-000-5400	EMA	88.52
			358-000-5400	EMA	-21.27
			358-000-5400	EMA	32.05
			358-000-5400	EMA	358.30
			358-000-5400	EMA	89.85
					10,376.46

CHESTER COUNTY
P.O. Box 580
CHESTER, SC 29706

FIRST CITIZENS BANK
CHESTER, SC 29706
67-148/532

128581

DATE	AMOUNT
04/21/2017	*****10,376.46

PAY TEN THOUSAND THREE HUNDRED SEVENTY-SIX AND 46 / 100

TO THE FIRST CITIZENS BANK
ORDER P O BOX 63001
OF CHARLOTTE, NC 28263-3001

Thomas E. Dailey

**CONTINUED ON OVERFLOW PAGE (S) **

[REDACTED]

'See Reverse Side For Easy Opening Instructions'

County of Chester
Operating Account
PO Drawer 686
Chester, SC 29706

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE, NC 28263-3001

VENDOR (100913) FIRST CITIZENS BANK

CHECK DATE	CHECK NUMBER	PAGE
04/21/2017	128581	2 OF 2

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
4472565264423206	04/03/17		358-000-5400	EMA	64.79
			358-000-5400	EMA	60.75
			358-000-5400	EMA	43.19
			358-000-5400	EMA	32.37
4472565426868421	04/03/17		100-190-5224	SUPERVISOR	836.74
			311-000-5400	SUPERVISOR	3,167.61
4472565047459048	04/03/17	27457	100-301-5202	SHERIFF'S DEPT	5.80
			100-301-5202	SHERIFF'S DEPT	10.17
4472565047459048	04/03/17	27619	100-301-5202	SHERIFF'S DEPT	247.17
4472565047459048	04/03/17	27449	100-301-5207	SHERIFF'S DEPT	-451.76
4472565047459048	04/03/17		100-301-5207	SHERIFF'S DEPT	5,627.40

CONTINUED FROM CHECK 128581

10,376.46

VOID

County of Chester
 Operating Account
 PO Drawer 686
 Chester, SC 29706

FIRST CITIZENS BANK
 P O BOX 63001
 CHARLOTTE, NC 28263-3001

VENDOR (100913) FIRST CITIZENS BANK

CHECK DATE	CHECK NUMBER	PAGE
04/21/2017	128581	2 OF 2

INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT
4472565264423206	04/03/17		358-000-5400	EMA	64.79
			358-000-5400	EMA	60.75
			358-000-5400	EMA	43.19
			358-000-5400	EMA	32.37
4472565426868421	04/03/17		100-190-5224	SUPERVISOR	836.74
			311-000-5400	SUPERVISOR	3,167.61
4472565047459048	04/03/17	27457	100-301-5202	SHERIFF'S DEPT	5.80
			100-301-5202	SHERIFF'S DEPT	10.17
4472565047459048	04/03/17	27619	100-301-5202	SHERIFF'S DEPT	247.17
4472565047459048	04/03/17	27449	100-301-5207	SHERIFF'S DEPT	-451.76
4472565047459048	04/03/17		100-301-5207	SHERIFF'S DEPT	5,627.40

CONTINUED FROM CHECK 128581

10,376.46

VOID

County of Chester
Operating Account
 PO Drawer 686
 Chester, SC 29706

FIRST CITIZENS BANK
 P O BOX 63001
 CHARLOTTE, NC 28263-3001



Name: K SHANE STUART
COUNTY OF CHESTER

PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle
Closing Date:
04/03/17

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$886.53	Number of days in billing cycle	31
Payments and credits	886.53	Credit limit	15,000.00
Purchase and adjustments less refunds	4,004.35	Available credit	10,995.65
Cash advances	0.00	Available cash line	4,500.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$4,004.35	NEW MINIMUM PAYMENT DUE	200.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 2

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/16	03/17	24755427075270752	CROWN TROPHY 037 FORT MILL SC	836.74
03/22	03/22	00000111	PAYMENT RECEIVED -- THANK YOU	886.53-
03/29	03/30	24707807088980150	48 hr books inc 330-375-9128 OH	3,167.61

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual
Membership Fee disclosure.

Total Periodic FINANCE CHARGES: \$0.00

Total Transaction Charges: \$0.00

Total FINANCE CHARGES: \$0.00

ANNUAL PERCENTAGE RATE: 0.000%

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION



Name: CHESTER COUNTY EMA
COUNTY OF CHESTER

PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle:
Closing Date:
04/03/17

Account
Number:
[REDACTED]

Account Summary

		Number of days in billing cycle	
Beginning balance	\$260.57	31	
Payments and credits	281.84		5,000.00
Purchase and adjustments less refunds	954.60		4,066.67
Cash advances	0.00		1,500.00
FINANCE CHARGES	0.00		04/28/17
Balance 04/03/17	\$933.33		46.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 4

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/03	03/06	240731470649000019	COPPER RIVER OF COLUMBIA COLUMBIA SC	30.76
03/03	03/05	24155427062170629	EMBASSY KINGSTON PLANT MYRTLE BEACH SC	62.12
03/03	03/05	24431067063207083	WAFFLE HOUSE 0965 LEXINGTON SC	13.29
03/09	03/10	240606570689000011	SAMS EQUIPMENT & OUTDOOR 989-9999999 SC	19.24
03/14	03/16	24445007074100146	DOLLAR-GENERAL #1606 CHESTER SC	3.24
03/15	03/16	24445007075400120	WM SUPERCENTER #385 ROCK HILL SC	21.37
03/15	03/16	24445007075000683	BI-LO GROCERY #5266 CHESTER SC	13.16
03/16	03/19	24445007076100191	DOLLAR-GENERAL #3253 CHESTER SC	21.60
03/19	03/20	24445007079400137	WM SUPERCENTER #4593 ROCK HILL SC	88.52
03/20	03/23	74226367081360204	WAL-MART #1603 CHESTER SC CREDIT	21.27-
			Order Date: 03/20/17	
03/20	03/21	24445007060400129	WM SUPERCENTER #1603 CHESTER SC	32.05
03/22	03/22	00000109	PAYMENT RECEIVED -- THANK YOU	260.57-
03/22	03/23	24060657081900013	LOGO WORKS INC 803-3273613 SC	358.30
03/22	03/24	24692167082000415	NORTHERN TOOL EQUIP-SC ROCK HILL SC	89.85
03/22	03/23	24445007052000715	TRACTOR SUPPLY CO #1743 CHESTER SC	64.79
03/24	03/26	24445007084400136	WM SUPERCENTER # 603 CHESTER SC	60.75
03/28	03/29	24755427058730882	THE WIRELESS COMPANY CHESTER SC	43.19
03/30	03/31	24445007090400127	WM SUPERCENTER # 603 CHESTER SC	32.37

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION



PO BOX 1580
ROANOKE VA 24007-1580

Billing Cycle
Closing Date:
04/03/17

Name: ALEX UNDERWOOD
COUNTY OF CHESTER

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$597.62	Number of days in billing cycle	31
Payments and credits	1,049.38	Credit limit	10,000.00
Purchase and adjustments less refunds	5,890.54	Available credit	4,561.22
Cash advances	0.00	Available cash line	3,000.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$5,438.78	NEW MINIMUM PAYMENT DUE	271.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 4

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/04	03/05	24692167063000838	UPS*293224DLA6C 800-811-1648 GA	5.80
03/04	03/05	24692167063000838	UPS*1ZJT599U0300007615 800-811-1648 GA	10.17
03/16	03/17	24692167075000239	EXPEDIA7252303400445 EXPEDIA.COM WA	380.00
03/16	03/19	24431067076344900	AMERICAN AIR0017956565630FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX Orig. Airport: PHX Dest. Airport: CLT	1,311.85
03/16	03/19	24431067076344900	AMERICAN AIR0017956565631FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX Orig. Airport: PHX Dest. Airport: CLT	1,311.85
03/16	03/19	24431067076344900	AMERICAN AIR0017956565632FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX Orig. Airport: PHX Dest. Airport: CLT	1,311.85
03/16	03/19	24431067076344900	AMERICAN AIR0017956565633FORT WORTH TX Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD Orig. Airport: ORD Dest. Airport: RNO Orig. Airport: RNO Dest. Airport: PHX	1,311.85

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
			Orig. Airport: PHX Dest. Airport: CLT	
03/22	03/22	00000110	PAYMENT RECEIVED -- THANK YOU	597.62-
03/27	03/29	24445007087200141	HOBBY LOBBY #383 ROCK HILL SC	247.17
03/29	03/30	74755427088170884	EMBASSY KINGSTON PLANT MYRTLE BEACH SC CREDIT Purchase ID: 1020769	451.76-

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual
Membership Fee disclosure.

Total Periodic FINANCE CHARGES: \$0.00

Total Transaction Charges: \$0.00

Total FINANCE CHARGES: \$0.00

ANNUAL PERCENTAGE RATE: 0.000%

Requisition Form

12050

Chester County, South Carolina





Reno

Jun 22, 2017 - Jun 29, 2017 | Itinerary # 7252303400445

Important Information

- Remember to bring your itinerary and government-issued photo ID for airport check-in and security.

Charlotte (CLT) → Reno (RNO)

Jun 22, 2017 - Jun 29, 2017 , 4 round trip tickets

CONFIRMED

Your reservation is booked and confirmed. Thank you for choosing us to reconfirm this reservation.

Your reservation is booked and confirmed. There is no need to call us to reconfirm this reservation.			Price Summary											
			Traveler 1: Adult	\$1,311.85										
			Flight	\$1,179.30										
			Taxes & Fees	\$132.55										
			Traveler 2: Adult	\$1,311.85										
			Flight	\$1,179.30										
			Taxes & Fees	\$132.55										
			Traveler 3: Adult	\$1,311.85										
			Flight	\$1,179.30										
			Taxes & Fees	\$132.55										
			Traveler 4: Adult	\$1,311.85										
			Flight	\$1,179.30										
			Taxes & Fees	\$132.55										
			Travel Protection	\$380.00										
			Total: \$5,627.40											
* Seat assignments, special meals, frequent flyer point awards and special assistance requests should be confirmed directly with the airline.														
Jun 22, 2017 - Departure 1 stop		Total travel time: 7 h 59 m												
 Charlotte Chicago 2 h 12 m CLT 7:45am ORD 8:57am American Airlines 1916 First (I) Seat 03A, 03C, 03D, 03F Confirm or change seats with the airline* 														
 Chicago Reno 4 h														
Additional Flight Services														
<ul style="list-style-type: none"> The airline may charge additional fees for checked baggage or other optional services. 														

ORD 10:34am RNO 12:44pm
 American Airlines 2409
 First (I) | Seat 05A, 05B, 05E, 05F | Confirm or change seats
 with the airline*

Jun 29, 2017 - Return 1 stop Total travel time: 6 h 24 m

Reno Phoenix 1 h 45 m
 RNO 12:35pm PHX 2:20pm

American Airlines 642
 First (D) | Seat 02F, 02D, 01F, 01D | Confirm or change seats
 with the airline*

Layover: 0 h 31 m

Phoenix Charlotte 4 h 8 m
 PHX 2:51pm CLT 9:59pm

American Airlines 623
 First (D) | Seat 03C, 03A, 03F, 03D | Confirm or change seats
 with the airline*

Airline Rules & Regulations

- We understand that sometimes plans change. We do not charge a cancel or change fee. When the airline charges such fees in accordance with its own policies, the cost will be passed on to you.
- **Tickets are nonrefundable, nontransferable and name changes are not allowed.**
- Please read the complete penalty rules for changes and cancellations applicable to this fare.
- View the complete terms and the condition of the description of coverage.
- Please read important information regarding airline liability limitations.

Cancellation Plan

Jun 22, 2017 - Jun 29, 2017

PURCHASED

You have purchased the travel protection plan. Please refer to your itinerary number when calling to ask questions or file a claim.

Price Summary

Travel Protection \$380.00

Total: \$380.00

All prices quoted in US dollars.

Need help with your reservation?

- Visit our Customer Support page.



PO BOX 1580
ROANOKE VA 24007-1580

Name: ALEX UNDERWOOD
COUNTY OF CHESTER

Billing Cycle
Closing Date:
04/03/17

Account
Number: [REDACTED]

Account Summary

Beginning balance	\$597.62	Number of days in billing cycle	31
Payments and credits	1,049.38	Credit limit	10,000.00
Purchase and adjustments less refunds	5,890.54	Available credit	4,561.22
Cash advances	0.00	Available cash line	3,000.00
FINANCE CHARGES	0.00	Payment due date	04/28/17
Balance 04/03/17	\$5,438.78	NEW MINIMUM PAYMENT DUE	271.00

FOR INFORMATION PLEASE CALL: 888-514-6849

SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 4

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
03/04	03/05	24692167063000838	UPS*293224DLA6C 800-811-1648 GA	204561 5.80 ✓
03/04	03/05	24692167063000838	UPS*1ZJT599U0300007615 800-811-1648 GA	204562 10.17 ✓
03/16	03/17	24692167075000239	EXPEDIA7252303400445 EXPEDIA.COM WA	204725 380.00
03/16	03/19	24431067076344900	AMERICAN AIR0017956565630FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	
03/16	03/19	24431067076344900	AMERICAN AIR0017956565631FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	
03/16	03/19	24431067076344900	AMERICAN AIR0017956565632FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	
03/16	03/19	24431067076344900	AMERICAN AIR0017956565633FORT WORTH TX	1,311.85
			Dept Date: 06/22/17 Orig. Airport: CLT Dest. Airport: ORD	
			Orig. Airport: ORD Dest. Airport: RNO	
			Orig. Airport: RNO Dest. Airport: PHX	
			Orig. Airport: PHX Dest. Airport: CLT	

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

\$5627.40



PO BOX 1580
ROANOKE VA 24007-1580

INDICATE CHANGE OF ADDRESS
ON BACK OF RETURN ENVELOPE

MINIMUM PAYMENT DUE	PAST DUE AMOUNT	PAYMENT DUE DATE	NEW BALANCE	ACCOUNT NUMBER
271.00	0.00	04/28/17	5,438.78	[REDACTED]

PROMPT CREDITING OF PAYMENTS: TO RECEIVE CREDIT FOR PAYMENT
AS OF THE DATE OF RECEIPT, WE MUST RECEIVE THIS PORTION OF THIS
STATEMENT AND YOUR CHECK OR MONEY ORDER BY 6:00AM.
USE ENCLOSED ENVELOPE AND MAKE PAYMENT TO

PLEASE WRITE IN
AMOUNT OF
PAYMENT ENCLOSED

\$ 5438 .78

PLEASE DETACH AND ENCLOSE
THIS PORTION WITH PAYMENT.

FIRST CITIZENS BANK
PO BOX 63001
CHARLOTTE NC 28263-3001

ALEX UNDERWOOD
COUNTY OF CHESTER
1476 J A COCHRAN BYPASS
CHESTER SC 29706

**N0003112

Ve# 100913

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
			Orig. Airport: PHX Dest. Airport: CLT	
03/22	03/22	00000110	PAYMENT RECEIVED - THANK YOU	597.62-
03/27	03/29	24445007087200141	HOBBY LOBBY #383 ROCK HILL SC	204563 247.17 ✓
03/29	03/30	74755427088170884	EMBASSY KINGSTON PLANT MYRTLE BEACH SC CREDIT Purchase ID: 1020769	refund 451.76- 204564

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual

Membership Fee disclosure.

Total Periodic FINANCE CHARGES: \$0.00

Total Transaction Charges: \$0.00

Total FINANCE CHARGES: \$0.00

ANNUAL PERCENTAGE RATE: 0.000%

last month
maybe

Embassy Kingston - 843-449-0006
 Acctg Dept
 4/11/17 - Esta Alba - 1ft msg.
 front desk - copy of credit - Jennifer
 in Acctg
 pd w/ check - # 128147 (3/17/17)
 2/24 - charged
 card
 Ve# 100534
 581-2741
 Hope



Shipment Receipt

Transaction Date: 01 Mar 2017

Tracking Number:

1ZJT599U0300007615

Address Information			
Ship To:	Ship From:	Return Address:	
[REDACTED] 1067 Parkside Drive [REDACTED]	Chester County Sheriff's Office [REDACTED] Jimmy Neal 2740 Dawson Drive Chester SC 29706 Telephone:8035815131 email:hbradley@chesterso.com	Chester County Sheriff's Office [REDACTED] Jimmy Neal 2740 Dawson Drive CHESTER SC 29706 Telephone:8035815131 email:hbradley@chesterso.com	

Package Information			
Weight	Dimensions / Packaging	Declared Value	Reference Numbers
1. 3.0 lbs (3.0 lbs billable)	Other Packaging		

UPS Shipping Service and Shipping Options			
Service:	UPS Ground Service		
Guaranteed By:	End of Day Monday, Mar 6, 2017		
Shipping Fees Subtotal:	10.17 USD		
Transportation	10.17 USD		
Additional Shipping Options			
Quantum View Notify E-mail Notifications:	No Charge		
1 hbradley@chesterso.com: Ship, Exception, Delivery	[REDACTED]		

Pickup Information			
Pickup Address			
Chester County Sheriff's Office [REDACTED]			
2740 Dawson Drive Chester SC 29706 Telephone:8035815131 email:hbradley@chesterso.com			
Earliest Pickup Time:			
3/02/2017 9:00 A.M.			
Latest Pickup Time:			
3/02/2017 4:00 P.M.			
Pickup Request Number:			
\$293224DLA6C			
Schedule a Pickup			
Fuel Surcharge	5.80 USD		
Total Pickup Charges	0.32 USD		
	6.12 USD		

Payment Information			
Bill Shipping and Pickup Charges:	Visa xxxxxxxxxxxx9048		
Shipping Charges:	10.17 USD ✓		
Subtotal Shipping Charges:	10.17 USD		
Subtotal Pickup Charges:	6.12 USD		
Retail rates were applied to this shipment			
Total Charged:	16.29 USD		

PURCHASE ORDER**BILL TO:**

Chester Co. Finance Dept
1476 J. A. Cochran By-Pass
Chester SC 29706

PHONE: (803) 385-2681

FAX: (803) 385-2945

PURCHASE ORDER NO: 27457

This PO number must appear on all packages
and correspondence

Page 1 of 1

VENDOR: 100913

FIRST CITIZENS BANK
P O BOX 63001
CHARLOTTE NC 28263-3001

SHIP TO:

Chester Co. Sheriff's Dept
2740 Dawson Drive
Chester SC 29706

(803) 581-5131

Notes to Vendor: ALL PACKING SLIPS AND INVOICES MUST HAVE PURCHASE ORDER NUMBER LISTED. PAYMENTS ARE NET 30.
PLEASE FORWARD A COPY OF YOUR SOUTH CAROLINA RESALE TAX CERTIFICATE TO
ACCOUNTSPAYABLE@CHESTERCOUNTY.ORG

Order Date: 03/02/2017

Date Required:

Ship Via:

Quantity	U/M	Catalog No	Description	Unit Price	Total
1.00			UPS Shipping to Return Item from [REDACTED]	16.2900	16.29
				SubTotal	16.29
				Sales Tax	0.00
				Order Total	16.29

Requested By: Doug McMurray

Account Distribution

REVIEWED BY	APPROVED BY	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	AMOUNT
SLANGLEY	SLANGLEY	100-301-5202	OPERATING SUPPLIES	16.29

QUESTIONS CONCERNING PURCHASE ORDERS SHOULD BE ADDRESSED TO THE CHESTER COUNTY PURCHASING OFFICE AT (803) 581-6268. Effective May 1, 2009 SALES TAX for Chester County is now 8%.

Authorized Signature:



PURCHASE ORDER**DUPLICATE****BILL TO:**

Chester Co. Finance Dept
 1476 J. A. Cochran By-Pass
 Chester SC 29706

PHONE: (803) 385-2681 FAX: (803) 385-2945

PURCHASE ORDER NO: 27619

This PO number must appear on all packages
 and correspondence

Page 1 of 1

VENDOR: 100913

FIRST CITIZENS BANK
 P O BOX 63001
 CHARLOTTE NC 28263-3001

SHIP TO:

Chester Co. Sheriffs Dept
 2740 Dawson Drive
 Chester SC 29706

(803) 581-5131

Notes to Vendor: ALL PACKING SLIPS AND INVOICES MUST HAVE PURCHASE ORDER NUMBER LISTED. PAYMENTS ARE NET 30.
 PLEASE FORWARD A COPY OF YOUR SOUTH CAROLINA RESALE TAX CERTIFICATE TO
 ACCOUNTSPAYABLE@CHESTERCOUNTY.ORG

Order Date: 03/30/2017

Date Required:

Ship Via:

Quantity	U/M	Catalog No	Description	Unit Price	Total
1.00			(24) Custom Frame	231.0000	231.00
			Receipt # S-383, T-2689		
			Purchased @ Hobby Lobby		
				SubTotal	231.00
				Sales Tax	18.48
				Order Total	249.48

Requested By: Doug McMurray

Account Distribution

REVIEWED BY	APPROVED BY	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	AMOUNT
SLANGLEY	SLANGLEY	100-301-5202	OPERATING SUPPLIES	249.48

QUESTIONS CONCERNING PURCHASE ORDERS SHOULD BE ADDRESSED TO THE CHESTER COUNTY PURCHASING OFFICE AT (803) 581-6268. Effective May 1, 2009 SALES TAX for Chester County is now 8%.

Authorized Signature:



HOBBY LOBBY

Super Savings, Super Selection!

1526 Meeting Blvd.

Rock Hill, SC 29730

Hobby Lobby Store #383 (803) 327-5066

S-383 R-1 T-2689 BREANNA L SALE

SUBTOTAL 231.00

TAX TOTAL 16.17

TOTAL 247.17

VISA 247.17

AUTH# : 09423G

--Continued on Side 2--

--Side 2--

ACCT: VISA INSERTED
VISA CREDIT
CARD [REDACTED] EXP **/**
REF # AUTH # RESP 00
152403271042 09423G ISO 00
AID: A0000000031010
TSI: 6800 ARC:00 CUR:0840
TVR: 8080008000
APP: VISA CREDIT
IAD: 06010A03A01000

Signature
CHANGE DUE .00

Number of Items Purchased: 24

Thank You. Please come again.
Become a fan on Facebook.
Return Policy on back of receipt

Visit our website at www.hobbylobby.com



0383001026890327174

3/27/17 03:22 PM

HOBBY LOBBY

Super Savings, Super Selection!

RETURN POLICY

Hobby Lobby values customer satisfaction; with or without the receipt.

With Original Sales Receipt:

Within 90 days of purchase we will gladly exchange the merchandise, give store credit or issue a refund based on the original method of payment. There will be a wait of 10 calendar days on check purchases, or merchandise credit can be issued.

Without Original Sales Receipt:

You may exchange the merchandise or be issued a merchandise credit based on the lowest selling price in the last 90 days. Valid ID is required.

We reserve the right to limit or refuse to accept the return of certain products and non-receipted items.

Thank you for shopping at Hobby Lobby.



HOBBY LOBBY

CUSTOMER INFORMATION

Customer Name

Address *Bo3- 201-3591*

Primary Telephone

Secondary Telephone

Address

Hobby Lobby# 303 Phone# 327-5000
 Date Order Taken 3/11/17 Order 5 of 10
 Order Taken By LB Framed By VD
 Date Due 3/26/17
 Audited By 3/16/17

*1/1
1/1
1/1
1/1
1/1
1/1
1/1*

City *Office of Governor w/ signature* State *3191 (use)* Zip

Artwork Description/Condition Thoroughly Inspect the Artwork. Fill Out Completely and Check All That Apply

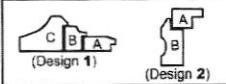
Stains / Spots
 Mold / Mildew
 Wrinkles / Creases
 Tears / Holes

Acid Burn
 Fading / Color Shift
 Finger Prints
 Crooked / Out of Square

Tape / Tape Residue
 Brittle / Scratched
 Glued / Starched
 Rolled

Ruckers / Dents
 Smears
 Moisture Damage
 Flaking

FRAMES / FILLETS

Custom #	Location #	A		\$ <u>16.00</u>
Stacked Custom #	Location #			\$ <u>.</u>
Readymade	<i>Mahogany</i>	Frame Size	<u>11 x 14</u>	\$ <u>.</u>
Customer's / Sectional		United Inches		\$ <u>.</u>
Fillet / Strainer Bar #	Location #			

Frame(s) Please remember to specify the decimal values.

MATS / FILLETS

Top Layer#	977	Color Name	Midnight	Location	50	Width	<u>5/8</u> ft	\$ <u>10.00</u>
2nd Layer#	968	Color Name	Gold	Location	93	Width	<u>1/4</u>	\$ <u>10.00</u>
3rd Layer#		Color Name		Location		Width		\$ <u>.</u>
Special Design		(See diagram for layout)				Window Opening	<u>7 3/4 x 10 5/8</u>	\$ <u>.</u>

GLASS

UV Regular UV Non Reflective Museum UV Acrylic Customer's No Glass \$.

MOUNTING

Regular FCB Acid Free FCB Drymount Needleart/Canvas Shadowbox \$.

Authorization To Trim Artwork

Notes:

OTHER / NOTES

p/h \$ 2.50

Customer Signature

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be disassembled and the abandoned artwork will be discarded.

\$ 38.50
 Estimated Total Before Tax

Customer Signature

White: Artwork Yellow: Mat

Pink: Customer

Neal 3/16/27

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

CUSTOMER INFORMATION

Hobby Lobby#	383	Phone#	327-5066
Date Order Taken	3/14/17	Order	2nd
Order Taken By	LB	Framed By	40
Date Due	3/26/17		3/14/17
Audited By			
			1/1
			1/1
			1/1
			1/1
			1/1
			1/1
			1/1

Customer Name

Address *Refused*

Primary Telephone 805-209-8595

Secondary Telephone

Address

City

State

Zip

Artwork Description/Condition: Thoroughly inspect the Artwork. Fill Out Completely and Check All That Apply

Office of the Sec of State

- Stains / Spots
- Mold / Mildew
- Wrinkles / Creases
- Tears / Holes
- Acid Burn
- Fading / Color Shift
- Finger Prints
- Crooked / Out of Square
- Tape / Tape Residue
- Brittle / Scratched
- Glued / Starched
- Rolled
- Puckers / Dents
- Smears
- Moisture Damage
- Flaking

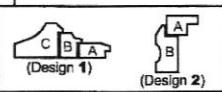
FRAMES / FILLETS

Custom #

Location #

Design 1 or 2: Mounting

A



\$ 16.00

\$.

Stacked Custom #

Location #

You may use the lines below for your stacked frames.

Readymade

Mahog

Customer's / Sectional

Assembly / Built-From

Fillet / Strainer Bar #

Location #

Frame
Size

United
Inches

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Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

CUSTOMER INFORMATION

Customer Name **Johnny** Address **709 2nd**
Primary Telephone **Retired**

Address

Hobby Lobby#	383	Phone#	327-5000
Date Order Taken	3/11/17	Order #	4 of 10
Order Taken By	LB	Framed By	VD
Date Due	3/26/17		3/18/17
Audited By			
	/ /		
	/ /		
	/ /		
	/ /		
	/ /		
	/ /		
	/ /		

City **State** Zip **Zip**

Artwork Description/Condition Thoroughly Inspect the Artwork, Fill Out Completely and Check All That Apply

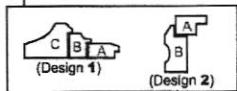
Honorable Alex Underwood

Stains / Spots Acid Burn Tape / Tape Residue Puckers / Dents
 Mold / Mildew Fading / Color Shift Brittle / Scratched Smears
 Wrinkles / Creases Finger Prints Glued / Starched Moisture Damage
 Tears / Holes Crooked / Out of Square Rolled Flaking

FRAMES / FILLETS

Custom # **Location #** **A** **3/29 @ 50%** **\$ 16.00**

Design 1 or 2: **Mahogany**



Stacked Custom # **Location #**

Readymade

Mahog

Customer's / Sectional **(Assembly / Rent Fee)**

Fillet / Strainer Bar # **Location #**

Ignore the stack code for fillets & strainer bars. They should not be ordered as part of a stack.

MATS / FILLETS

Top Layer# **977** Color Name **Midnight** **BG** **fit** **\$ 10.00**

2nd Layer# **968** Color Name **Gold** **G** **7/4** **1/4** **\$ 10.00**

3rd Layer# **Color Name** **Location** **Width** **Window** **7 3/4** **10 5/8** **\$ 1.00**

Special Design **(See diagram for layout)** **Opening** **7 3/4** **x 10 5/8** **\$ 1.00**

Frames: Please remember to specify the decimal values.

GLASS

UV Regular UV Non Reflective Museum UV Acrylic Customer's No Glass **\$ 1.00**

MOUNTING

Regular FCB Acid Free FCB Drymount Needleart/Canvas Shadowbox **\$ 1.00**

Authorization To Trim Artwork

Notes:

Customer Signature

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

p/h \$ 2.50

Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be disassembled and the abandoned artwork will be discarded.

\$ 38.50
Estimated Total Before Tax

Customer Signature

White: Artwork

Yellow: File

Pink: Customer

HOBBY LOBBY

CUSTOMER INFORMATION

Customer Name: [REDACTED] Primary Telephone: [REDACTED] Secondary Telephone: [REDACTED]
 Address: [REDACTED] Refused
 Address: [REDACTED]

Hobby Lobby#	363	Phone#	327-5060
Date Order Taken	3/11/17	Order	1 of 10
Order Taken By	[REDACTED]	Framed By	[REDACTED]
Date Due	3/20/17		3/14/17 (C)
Audited By			
	/ /		
	/ /		
	/ /		
	/ /		
	/ /		
	/ /		
	/ /		

Address:

City: _____ State: _____ Zip: _____

Artwork Description/Condition Thoroughly Inspect the Artwork. Fill Out Completely and Check All That Apply

Office of Sec. of State

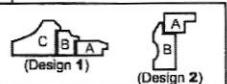
<input type="checkbox"/> Stains / Spots	<input type="checkbox"/> Acid Burn	<input type="checkbox"/> Tape / Tape Residue	<input type="checkbox"/> Puckers / Dents
<input type="checkbox"/> Mold / Mildew	<input type="checkbox"/> Fading / Color Shift	<input type="checkbox"/> Brittle / Scratched	<input type="checkbox"/> Smears
<input type="checkbox"/> Wrinkles / Creases	<input type="checkbox"/> Finger Prints	<input type="checkbox"/> Glued / Starched	<input type="checkbox"/> Moisture Damage
<input type="checkbox"/> Tears / Holes	<input type="checkbox"/> Crooked / Out of Square	<input type="checkbox"/> Rolled	<input type="checkbox"/> Flaking

FRAMES / FILLETS

31" x 24" @ 50%

Framers

Please remember to specify the decimal values.

Custom #	Location #	A	\$ 16.00
Stacked Custom #	Location #	Design 1 or 2: Mounting	
Readymade	[REDACTED]		\$ [REDACTED]
Customer's / Sectional	[REDACTED]		\$ [REDACTED]
Fillet / Strainer Bar #	Location #	Frame Size	\$ [REDACTED]
		11 x 14	\$ [REDACTED]
		United Inches	\$ [REDACTED]

MATS / FILLETS

Top Layer#	977	Color Name	Midnight BG	Location	50	Width	\$ 10.00
2nd Layer#	968	Color Name	Gold	Location	99	Width	\$ 10.00
3rd Layer#		Color Name		Location		Width	\$ [REDACTED]
Special Design		(See diagram for layout)				Window Opening	7 3/4 x 10 1/8 \$ [REDACTED]

GLASS

UV Regular UV Non Reflective Museum UV Acrylic Customer's No Glass \$ [REDACTED]

MOUNTING

Regular FCB Acid Free FCB Drymount Needleart/Canvas Shadowbox \$ [REDACTED]

Authorization To Trim Artwork

Notes:

OTHER / NOTES

p/h \$ 2.50

Customer Signature

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

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\$ 38.50
Estimated Total Before Tax

Customer Signature

White: [REDACTED]

Yellow: [REDACTED]

Pink: [REDACTED]

Visit hobbylobby.com to find custom frame sales and other great deals in your area!

HOBBY LOBBY

CUSTOMER INFORMATION

Customer Name

Address Refreshed

Primary Telephone

Secondary Telephone

Address

City State Zip

Artwork Description/Condition Thoroughly Inspect the Artwork. Fill Out Completely and Check All That Apply

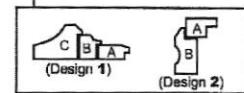
Office of Secretary of State

<input type="checkbox"/> Stains / Spots	<input type="checkbox"/> Acid Burn	<input type="checkbox"/> Tape / Tape Residue	<input checked="" type="checkbox"/> Pockers / Dents
<input type="checkbox"/> Mold / Mildew	<input type="checkbox"/> Fading / Color Shift	<input type="checkbox"/> Brittle / Scratched	<input type="checkbox"/> Smears
<input checked="" type="checkbox"/> Wrinkles / Creases	<input type="checkbox"/> Finger Prints	<input type="checkbox"/> Glued / Starched	<input type="checkbox"/> Moisture Damage
<input type="checkbox"/> Tears / Holes	<input type="checkbox"/> Crooked / Out of Square	<input type="checkbox"/> Rolled	<input type="checkbox"/> Flaking

FRAMES / FILLETS

Frame(s) Please remember to specify the decimal values.

Custom #	Location #	A	Design 1 or 2: Mounting	\$ 16.00
Stacked Custom #	Location #			\$.
Readymade	<i>Mahog</i>			\$.
Customer's / Sectional	(Assembly Right End)			\$.
Fillet / Strainer Bar #	Location #	Frame Size	11 x 14	\$.
		United Inches		\$.



Top Layer#	977	Color Name	<i>Midnight</i>	Location	50	Width	<i>1/2</i>	\$ 10.00
2nd Layer#	968	Color Name	<i>Gold</i>	Location	45	Width	<i>1/4</i>	\$ 10.00
3rd Layer#		Color Name		Location		Width		\$.
Special Design		(See diagram for layout)	Window Opening	<i>7 3/4</i>	<i>10 5/8</i>			\$.

GLASS

UV Regular UV Non Reflective Museum UV Acrylic Customer's No Glass \$.

MOUNTING

Regular FCB Acid Free FCB Drymount Needleart/Canvas Shadowbox \$.

Authorization To Trim Artwork

Notes:

OTHER / NOTES

\$ 2.50

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Customer Signature

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

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38.50

Customer Signature

Estimated Total Before Tax

White: Adhesive

Yellow: File

Customer

HOBBY LOBBY

CUSTOMER INFORMATION

Hobby Lobby#	383	Phone#	327-5000
Date Order Taken	3/11/17	Order	6 of 6
Order Taken By	LB	Framed By	LB
Date Due	3/20/17		3/19/2017
Audited By _____			

Customer Name: Neale Johnson Primary Telephone: 800-222-8000 Secondary Telephone: 800-222-8000
 Address: 123 Main Street
 Address: Neale Johnson

City: _____ State: _____ Zip: _____

Artwork Description/Condition Thoroughly Inspect the Artwork. Fill Out Completely and Check All That Apply

Cert of Appreciation

<input type="checkbox"/> Stains / Spots	<input type="checkbox"/> Acid Burn	<input type="checkbox"/> Tape / Tape Residue	<input checked="" type="checkbox"/> Pockers / Dents
<input type="checkbox"/> Mold / Mildew	<input type="checkbox"/> Fading / Color Shift	<input type="checkbox"/> Brittle / Scratched	<input type="checkbox"/> Smears
<input checked="" type="checkbox"/> Wrinkles / Creases	<input type="checkbox"/> Finger Prints	<input type="checkbox"/> Glued / Starched	<input type="checkbox"/> Moisture Damage
<input type="checkbox"/> Tears / Holes	<input type="checkbox"/> Crooked / Out of Square	<input type="checkbox"/> Rolled	<input type="checkbox"/> Flaking

FRAMES / FILLETS

3199.250%

Frame

Frame

Custom #	Location #	A	\$ 16.00
Stacked Custom #	Location #	Design 1 or 2: Molding	\$.00
Readymade	<u>Mahogany</u>	(Design 1) (Design 2)	\$.00
Customer's / Sectional	(Assumeiv. Ret. Fee)	Frame Size 11 x 14	\$.00
Fillet / Strainer Bar #	Location #	United Inches	\$.00

Frame

Frame

Top Layer#	Color Name	Location	Width	\$ 10.00
2nd Layer#	Color Name	Location	Width	\$ 10.00
3rd Layer#	Color Name	Location	Width	\$.00
Special Design	(See diagram for layout)	Window Opening	8 1/4 x 10 3/4	\$.00

GLASS

UV Regular UV Non Reflective Museum UV Acrylic Customer's No Glass \$.00

MOUNTING

Regular FCB Acid Free FCB Drymount Needleart/Canvas Shadowbox \$.00

Authorization To Trim Artwork

Notes:

Customer Signature

By my signature, I authorize Hobby Lobby to trim my artwork to conform to the custom framing order set forth on this form.

OTHER / NOTES

p/h \$ 2.50

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Note: The Customer assumes the risk and liability for any loss or damage upon delivery of artwork and acknowledges that the value of the property delivered to Hobby Lobby does not exceed \$250.00. Hobby Lobby's total liability for any loss or damage to customer's property shall not exceed \$250.00. Any items not picked up after 90 days from the due date will be deemed abandoned. All abandoned orders will be disassembled and the abandoned artwork will be discarded.

\$ 38.50

Customer Signature

Estimated Total Before Tax

Yellow: File

Pink: Customer

Renee Holley

From: Jennifer Compton <Jennifer.Compton@Hilton.com>
Sent: Tuesday, April 11, 2017 11:53 AM
To: Renee Holley
Subject: Underwood Refund Screenshot 88105878
Attachments: Underwood Refund Screenshot 88105878.docx

Ms. Holley ~

Please find attached the screenshot for Mr. Underwood's reservation that shows the following:

- Original Advance Deposit charged to Visa ending in 9048 on 2/24/17 for \$451.76
- Refund posted to Visa *9048 on 3/28/17 for \$451.76
- Check #128147 posted for \$2,258.79 on 3/28/17

Please note that if a refund is for the exact amount of the charge, our system will no longer print it out on a receipt. However, the screenshot does show the original charge and the refund. Please note that our reservation system posts payments/deposits as a negative and refunds as a positive; however, room/miscellaneous charges post the opposite – charges are positives and refunds/credits are negative. Please allow 3 – 5 business days for the refund to appear in your account.

Please let me know if I can do anything else for you or if you have any questions.

Thank you and have a great day!

Jennifer Compton
Accounting Clerk

Kingston Resorts

Hilton  Myrtle Beach Resort -  Royale Palms at Kingston Shores

Embassy Suites  Myrtle Beach Oceanfront - Kingston Plantation Condo Company 

9800 Queensway Blvd | Myrtle Beach, SC 29572 | USA

T: 843.497.2405 | F: 843.497.1730 | E: Jennifer.Compton@hilton.com

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Underwood 88105878 [GTD]

Action Room Guest Profile Receipt Help

Itinerary:

Hotel	Room Type	Arrival	Nts	Departure	Rate	Upsell	Rt Chg	Rate Plan	C/H	Ad	Ch	Cr	RB
MYRKP	20FC	7/8/2017 Sat	5	7/13/2017 Thu	389.00	0.00		LV3	N	2	2	0	0

Guests In Room:

Underwood, Alex

C Status: Hasn't Arrived

Alex Underwood
2740 Dawson Drive
Chester, SC 29706 US
8035815131

Hotel

Room Number:

Room Status:

Room Balance: (\$2,258.79)

Group Code:

Email: hbradley@chesterso.

Email Zip/Out Folio:

Posting

Action View Help

Guest Name: Underwood, Alex

Room:

View Options

Receipt

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PO BOX 1580
ROANOKE VA 24007-1580

Name: ALEX UNDERWOOD
COUNTY OF CHESTER

Billing Cycle
Closing Date:
03/03/17

Account
Number [REDACTED]

Account Summary

Beginning balance	\$330.11	Number of days in billing cycle	28
Payments and credits	330.11	Credit limit	10,000.00
Purchase and adjustments less refunds	597.62	Available credit	9,402.38
Cash advances	0.00	Available cash line	3,000.00
FINANCE CHARGES	0.00	Payment due date	03/28/17
Balance 03/03/17	\$597.62	NEW MINIMUM PAYMENT DUE	29.00

FOR INFORMATION PLEASE CALL: 888-514-6849
SEND INQUIRIES TO: FIRST CITIZENS BANK PO BOX 1580 ROANOKE VA 24007-1580

Page 1 of 2

TRANSACTIONS SINCE LAST STATEMENT

Trans	Post	Reference Number	Description	Amount
02/14	02/14	00000068	PAYMENT RECEIVED -- THANK YOU	330.11-
02/15	02/17	24001757047286512	SC.GOV 803-771-0131 SC Order Date: 02/15/17	126.00
02/25	02/26	24755427056260563	EMBASSY KINGSTON PLANT MYRTLE BEACH SC	451.76
02/25	02/26	24692167056000256	UPS*2921P1KJEF 800-811-1648 GA	6.90
02/25	02/26	24692167056000256	UPS*1ZJT15Z0P900028217 800-811-1648 GA	12.96

TYPE OF BALANCE	MONTHLY PERIODIC RATE	CORRESPONDING ANNUAL PERCENTAGE RATE	AVERAGE DAILY BALANCE	PERIODIC FINANCE CHARGES
Purchases	0.721	8.65	0.00	0.00
Cash Advances	1.874	22.49	0.00	0.00

* Periodic Rate May Vary.

NOTE: See reverse side for Annual

Membership Fee disclosure.

Total Periodic FINANCE CHARGES: \$0.00

Total Transaction Charges: \$0.00

Total FINANCE CHARGES: \$0.00

ANNUAL PERCENTAGE RATE: 0.000%

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION



9800 Queensway Boulevard, Myrtle Beach, South Carolina, 29572, USA
+1-843-282-3222

Reservation Confirmation # 88105878

Hotel

Kingston Plantation Condos
9800 Queensway Boulevard
Myrtle Beach, South Carolina 29572
USA
Phone: +1-843-282-3222

[Maps and directions](#) [Local guide](#)

Room and Plan Selection

Room:
2 adults, 2 children

~~1 BEDROOM OCEANFRONT CONVENIENCE PLANES~~ —
Price (5 nights x 389.00) 1,945.00
Room Subtotal 1,945.00
Resort charge: 89.95
Taxes 223.84

[Next Available Rate](#)

Total for stay: \$2,258.79 USD

Stay Information

Arrival: Saturday, 08 Jul 2017
Departure: Thursday, 13 Jul 2017
1 room for 5 nights

Early check-in cannot be guaranteed. Contact the hotel to inquire about early check-in or late check-out. Hotel check-in time is 4:00 pm and check-out is at 11:00 am.

Guest Information

Guest name: Alex Underwood
Additional Guests:
Address type: Home
Address: On file
Email: On file
Phone: On file

Payment Information

Card type: Visa
Card number: ~~*****9048~~
Expiration: May 2019

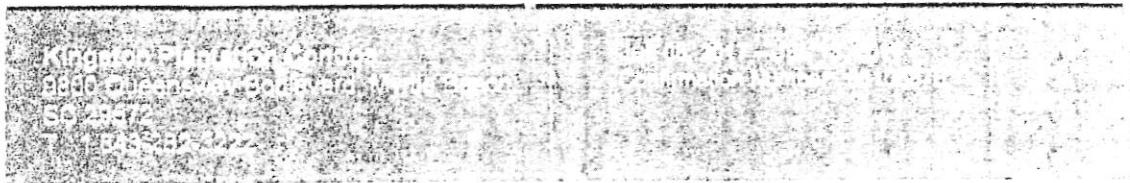
389.00 451.76

1 bedroom (King size)-
King Suite - 399.00 462.85
per night

21449
100-301-5207

Hope Bradley

From: Embassy Suites by Hilton Confirmed <embassysuitesbyhilton@res.hilton.com>
Sent: Friday, February 24, 2017 9:47 AM
To: Hope Bradley
Subject: Your 08 Jul 2017 Confirmation #88105878



Alex
Underwood.
The Vice President

EXPLORE
Adventure and



FIND IT

Map & Directions

DISCOVER

Local



FOR YOUR
CONVENIENCE



ENJOY A SPECIAL ROOM
UPGRADE FOR ONLY \$10.00

VINTAGE ROSES IN AMERICA

2 BDRM OCEANFRONT CONDO

Rooms:

Guests: 2 Adults, 2 Children

Check In:

Check Out: Jul 13 11:00 AM

JOURNAL OF POLYMER SCIENCE: PART A

Rate per night : 389.00 USD

Total for Stay per Room

Rate: 1,945.00 USD

Resort Charge : 89.95 USD

Taxes: 223.84 USD

Total for Stay : 2,258.79 (USD)



Method and Materials of Study and Results

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ADDITIONAL INFORMATION:

Tax:

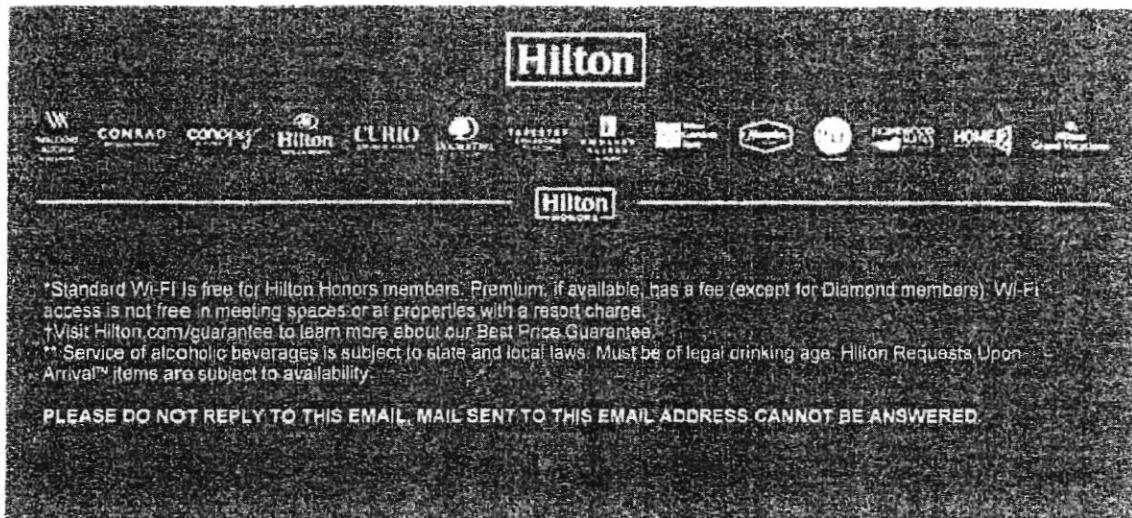
- 11.00% per room per night

Resort Charges:

- There is a 89.95 USD Resort Charge
- Daily Resort Charge will be added to the room rate and includes: Guest internet access, parking, Shuttle service throughout the resort to 2 mile radius outside resort, 1 hr of Tennis/Racquetball Court time per day, Splash park and Health club access; Children's activities, local and toll free calls
- Self parking: 0.00/night

RATE RULES AND CANCELLATION POLICY:

- Please contact us should you need to cancel your reservation
- Cancellations are required by 4PM on Jul 01, 2017 local hotel time to avoid cancellation penalties
- ~~✓ Your reservation is guaranteed by a deposit (451.76 USD that has been/will be charged to your credit card)~~
- No motorcycles, RV's, boats or trailers allowed on this property
- Pets are not permitted
- Barbecue grilling of any type is not permitted
- Maximum unit occupancy strictly enforced: 1-Bedroom (4 people), 2-Bedroom (6 people), 3-Bedroom (8 people), 4-Bedroom (10 people)
- Complimentary breakfast and evening beverages NOT included in condo rentals



VENDOR (100534) EMBASSY SUITES, MYRTLE BEACH				CHECK DATE	CHECK NUMBER	PAGE
INVOICE NUMBER	INVOICE DATE	PO NUMBER	ACCOUNT NUMBER	DESCRIPTION	INVOICE AMOUNT	
CON#88105878	03/17/17	27449	100-301-5207	SHERIFF'S ASSOCIATION-ALEX UNDEI	2,258.79	

2,258.79

CHESTER COUNTY
P.O. Box 580
CHESTER, SC 29706

FIRST CITIZENS BANK
CHESTER, SC 29706
67-148/532

128147

DATE	AMOUNT
03/17/2017	*****2,258.79

PAY TWO THOUSAND TWO HUNDRED FIFTY-EIGHT AND 79 / 100

TO THE EMBASSY SUITES, MYRTLE BEACH
ORDER 9800 QUEENS WAY BLVD
OF MYRTLE BEACH, SC 29572

Thomas E. Dailey

County of Chester
Operating Account
PO Drawer 686
Chester, SC 29706

EMBASSY SUITES, MYRTLE BEACH
9800 QUEENS WAY BLVD
MYRTLE BEACH, SC 29572

PURCHASE ORDER**BILL TO:**

Chester Co. Finance Dept
1476 J. A. Cochran By-Pass
Chester SC 29706

PURCHASE ORDER NO: 27449

This PO number must appear on all packages
and correspondence

Page 1 of 1

PHONE: (803) 385-2681

FAX: (803) 385-2945

VENDOR: 100534

EMBASSY SUITES, MYRTLE BEACH
9800 QUEENS WAY BLVD
MYRTLE BEACH SC 29572

SHIP TO:

Chester Co. Sheriffs Dept
2740 Dawson Drive
Chester SC 29706

(803) 581-5131

Notes to Vendor: ALL PACKING SLIPS AND INVOICES MUST HAVE PURCHASE ORDER NUMBER LISTED. PAYMENTS ARE NET 30.
PLEASE FORWARD A COPY OF YOUR SOUTH CAROLINA RESALE TAX CERTIFICATE TO
ACCOUNTSPAYABLE@CHESTERCOUNTY.ORG

Order Date: 03/01/2017

Date Required:

Ship Via:

Quantity	U/M	Catalog No	Description	Unit Price	Total
1.00			Hotel Reservation for : 2017 S.C. Sheriff's Association Attendee : Alex Underwood Arrival Date : 7/8/17 Departure Date : 7/13/17 Confirmation # 88105878 ** Taxes and Fees Included **	2,258.7900	2,258.79
				SubTotal	2,258.79
				Sales Tax	0.00
				Order Total	2,258.79

Requested By: Doug McMurray

Account Distribution

REVIEWED BY	APPROVED BY	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	AMOUNT
SLANGLEY	SLANGLEY	100-301-5207	PROFESSIONAL DEVELOP	2,258.79

QUESTIONS CONCERNING PURCHASE ORDERS SHOULD BE ADDRESSED TO THE CHESTER COUNTY PURCHASING OFFICE AT (803) 581-6268. Effective May 1, 2009 SALES TAX for Chester County is now 8%.

Authorized Signature: *J. M. P.*

203348